

## Supplementary Online Content

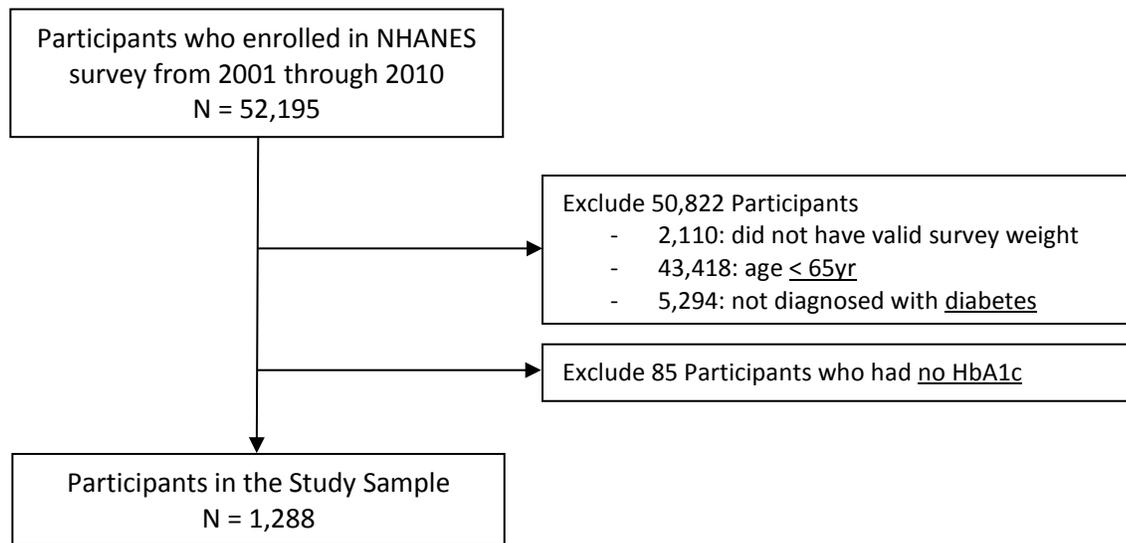
Lipska KJ, Ross JS, Miao Y, Shah ND, Lee SJ, Steinman MA. Potential overtreatment of diabetes mellitus in older adults with tight glycemic control. *JAMA Internal Medicine*. Published online January 12, 2015. doi:10.1001/jamainternmed.2014.7345

**eFigure.** Study Sample Selection From NHANES Cohorts 2001-2010.

**eTable.** Treatment of Older Adults With Diabetes Mellitus and HbA<sub>1c</sub> <7%.

This supplementary material has been provided by the authors to give readers additional information about their work.

**eFigure.** Study Sample Selection From NHANES Cohorts 2001-2010.



**eTable.** Treatment of Older Adults With Diabetes Mellitus and HbA<sub>1c</sub> <7%.

Among persons with HbA <sub>1c</sub> <7% (n = 762)		
	n	% (95% CI)
Insulin alone	67	9.0 (6.6 – 12.1)
Sulfonylurea alone	140	16.9 (13.6 – 20.7)
Insulin or sulfonylurea, AND another DM drug	203	29.0 (24.4 – 34.2)
Insulin + Other DM drug	27	4.5 (3.0 – 6.7)
Sulfonylurea + Other DM drug	149	20.6 (16.6 – 25.2)
Insulin + Sulfonylurea + Other DM drug	10	1.4 (0.7 – 2.8)
Insulin + Sulfonylurea	17	2.6 (1.4 – 4.7)
Other DM drug(s) alone	202	24.5 (20.9 – 28.4)
No Pharmacotherapy	150	20.7 (17.3 – 24.6)